

**F. Summary**

The claims have been amended above primarily for clarification purposes. Based on the above, Applicant submits that all claims are in condition for allowance. Favorable reconsideration is respectfully requested.

Applicant respectfully requests a two month extension of time to respond to the Office Action. A fee authorization form in the amount of \$2172 is submitted herewith to cover the fees for the extension of time and the new claims. If any further extension of time is required, Applicant hereby requests the appropriate extension of time. If any fees are inadvertently omitted or if any additional fees are required or have been overpaid, please appropriately charge or credit those fees to Conley, Rose & Tayon, P.C. Deposit Account Number 501505/5049-07600/EBM.

Respectfully submitted,



David W. Quimby  
Reg. No. 39,338  
Attorney for Applicant

CONLEY, ROSE & TAYON, P.C.  
P.O. BOX 398  
AUSTIN, TX 78767-0398  
(512) 703-1254 (voice)  
(512) 703-1250 (facsimile)

Date: July 30, 2001